COUNTY OF LOS ANGELES DEPARTMENT OF MENTAL HEALTH PROGRAM SUPPORT BUREAU QUALITY IMPROVEMENT DIVISION

CULTURAL COMPETENCY COMMITTEE MEETING MINUTES

Date: 7/10/2013

Present: Andrea Nuttall, TM Tribal TANF; Andy Vigil, Drew Child Development; Ann Lee, Long Beach-South Bay Geo

Initiative; Chandlen Norton, DMH Older Adults; James Randall, SA 2 Administration; Kevin Tsang, DMH OASOC; Leticia Ximénez, Community and Government Relations Division, CCC Co-Chair; Luis Escalante, WET; Luis Garcia, Tri City MHS; Lupe Ayala, SA7 Administration; Marc Borkheim, PSB-QID, CC Unit; Mary Lopez, Torres Martinez Tribal TANF; Mirtala Parada Ward, PSB-QID, UREP; Phyllis Coto, OASC; Rosina Guzman-Ehrlich, NAMI Westside L.A.; Sandra Chang-Ptasinski, PSB-QID, CC; Shirley Flournoy, TAY Division; Patsy Ayala for Susan Moser, DMH-HRB; Tamara Bess, The Village Family Services; Trudy Washington, PSB-QID, CC Unit;

William Owens, AVWEC; Yue Hua Xu (Vicki), DMH SA 3.

Participants

via WEBEX: Angela Trenado; Camille Do; Gina Alarcon; Helena Ditko; Kaliah Salas; and Tam Nguyen

Welcome & Introductions	Attendee introductions	Co-chairs
Review of Minutes	6/12/13 minutes reviewed and approved.	Co-Chairs

Ethnic Services Manager (ESM) Update

1. <u>Service Area—based Provider Directories</u>
CCC members were thanked for their feedback on the SA Provider Directories. The directories were revised to include the category of **cultures**. The new category now reads as **languages/cultures**. This addition highlights information on culturally and linguistically competent mental health services offered within our system of care. All the listings shown under the **languages/cultures**

category are provided by the Service Areas.

The Provider Directories will also include following definition of culture, taken from the 2013 National Culturally and Linguistically Appropriate Services (CLAS) Standards, U.S. Department of Health and Human Services, Office of Minority Health:

"The integrated pattern of thoughts, communications, actions, customs, beliefs, values, and institutions associated, wholly or partially, with racial, ethnic, or linguistic groups, as well as with religious, spiritual, biological, geographical, or sociological characteristics.

- 2. Health Equity Leadership Institute Pilot Project
 CiMH is piloting the Health Equity Leadership Institute
 (HELI) to support counties in the development of
 leadership skills through their individual pursuit of health
 equity, reduction of disparities, and ability to track and
 eliminate disparities over the course of one year. LACDMH
 will be participating in this learning collaborative. The
 expectations from each participating team include:
 - One-year commitment, starting in June 2013 and ending May 2014.
 - Team to identify the population with mental health disparity to be targeted
 - Team to implement and test one

Sandra Chang-Ptasinski, Ph.D., PSB-QID. CC Unit

strategy/intervention identified to reduce disparity in the target population

- Work with CiMH to track and measure the outcomes of strategy
- Participate in webinars, regional meetings, site visits and statewide meetings
- Team to implement CiMH- HELI teachings in between webinars

The LACDMH HELI Team will be comprised of Integrated Service Management (ISM) Model providers, Clergy Advisory Committee as cultural brokers, QI GIS Data Program Head, Empowerment and Advocacy, Executive Management Team member, CCC and ESM.

2013 Workgroup Subcommittee Updates

Family and Spirituality Training Recommendations

- Helena Ditko (Office of Family Engagement) is going to hold 4 more Family Engagement trainings. 2 are for 6 CE and CEU's and 2 are for all staff. The email went to DMH all recently. They have also been implementing an adult program pilot "Adopt an Affiliate".
- Luis Escalante (Training Division) SAVE THE DATE!! The American Indian/Alaskan Conference will be held on November 20th at the California Endowment Center. Luis and Helena are working together to do a Family Engagement training for interns.

Ann E. Lee, Ph.D., Clinical Psychologist II, Service Area 8 Administration

	Our subcommittee's project to come up with Family & Spirituality training recommendations is still in progress.	
	 We have not yet held a subcommittee meeting due to everyone's busy schedules. However, we will contact new members and work on scheduling a subcommittee mtg. 	
CDRPSimilarities and Differences Among Ethnic/Cultural Groups	Dr. Borkheim reported that the CRDP Workgroup did not meet the month of June, and a meeting is planned for the week of July 15 th . At this meeting, workgroup members will determine how to structure the upcoming speaker presentation on "Rites of Passage in Adolescence in Childhood." At this time, two speakers have agreed to present at the planned panel presentation.	Marc Borkheim, Ph.D. Clinical Psychologist II, PSB-QID-CCU
	The CRDP Powerpoint that the workgroup has planned is being worked on and workgroup membersin collaboration with the Cultural Competency Unitare preparing their respective sections.	
Reduction of Criminalization via Needs Assessment	Group project development remains in progress.	James Randall, M.S.W.
Cultural Competency e-News Column	The e-News workgroup is fulfilling its goal by now having the Cultural Competency Column in the Department's e-News. In addition, it is achieving its objective to publish at least 1 article per month in this CC Column. The workgroup continues to elicit relevant articles from the CCC and others.	Leticia Ximenez, Psy.D., CCC Co-Chair

Presentation:		
LACDMH Spirituality Parameters	Roderick Shaner, M.D., LACDMH Medical Director, gave a presentation on the LACDMH Spirituality Parameters. He gave a brief overview of why and how the Department developed the Spirituality Parameters. He stated that the parameters consider spirituality as a component of culture and emphasize that it is important to address clients' spirituality to ensure culturally sensitive DMH services for the best treatment and recovery outcomes — of course, in a non-judgmental nature and always making sure that the client knows that this is a matter of choice and not a requirement for DMH services. Hence, per the parameters, "Staff should have the skills to address the spiritual and religious interests, beliefs and worldviews of clients and families in order to integrate these into treatment goals whenever appropriate, recognizing that value-rich spiritual and religious concepts are often at the core of hope, wellness, recovery and the therapeutic processes." Dr. Shaner pointed out that the parameters do not permit proselytizing. Dr. Shaner discussed the definitions of Family, Proselytize, Religion and Spirituality. He then went on to explain the parameters' sections covering Assessment, Treatment Planning, Boundary Issues, Administrative Issues, Staff Training, and DMH Program Relationships with the Spirituality and Religious Communities.	Roderick Shaner, M.D., Medical Director
Next meeting	Wednesday, August 14, 2013; 1:30 pm to 3:30 pm 550 S. Vermont Ave., 10 th Floor Conference Room	

Respectfully Submitted,